APPENDIX 4A – EMPLOYERS’ HANDBOOK *(Remove comments in red before issuing, insert details for individual in areas highlighted in grey and consider/reflect company policy in areas highlighted in blue.)*

**[insert company name]**

**WORKING TIME REGULATIONS OPT-OUT AGREEMENT**

**Name of Employee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Post \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***This agreement is drawn up under the Working Time Regulations (Northern Ireland) 2016 and provides for you to enter into an agreement with [insert company name] to opt-out of the 48 hours limit in respect of the total weekly average hours required in your case.***

* 1. I agree that the 48 hours weekly limit specified in the Working Time Regulations (Northern Ireland) 2016 shall not apply in my case.
	2. I understand that this agreement will apply from **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**.
	3. Notwithstanding my agreement to dis-apply this limit, I am fully aware that I have a responsibility not to work hours so long that they may impair my efficiency or expose my colleagues, the public or property to risk.
	4. I understand that [insert company name] may need me to keep a record of my working hours and I will do this as and when required. If requested at any time, I will produce the record to [insert company name].
	5. I agree to give not less than one month’s notice to bring this agreement to an end.
	6. I am aware that I am under no obligation to sign this agreement and that it is illegal for me to be subject to any detriment if I decline to sign.

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**The original to be placed in the employee’s Personal File.**